

U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE

DECLARATION

ATTORNEY'S DOCKET NO. 11443/156

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name,

I believe I am an original, first, and joint inventor of the subject matter that is claimed and for which a patent is sought on the invention entitled ORIFICE INTRODUCER DEVICE, the specification of which was filed on July 31, 2003 as U.S. Patent Application Serial No. 10/632,271.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

PRIOR APPLICATION(S)

I hereby claim the benefits under Title 35, United States Code, § 119(e) of any US provisional listed below:

Application Number	Filing Date		
	(day month year)		
60/400,023	31 July 2002		

SEND CORRESPONDENCE, AND DIRECT TELEPHONE CALLS TO:

Kenyon & Kenyon
One Broadway
New York, New York 10004
(212) 425-7200 (phone)
(212) 425-5288 (facsimile)
Customer No. 26646

I declare that all statements made herein of my own knowledge are true and all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
INVENTOR	WHITMAN	Michael	P.
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	New Hope	PA	US
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	16 Pheasant Run	New Hope	PA 18938
Signature		Date 9/1	8/03
FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	DORROS	Gerald	
RESIDENCE & CITIZENSHIP		STATE OR FOREIGN COUNTRY	
	CITY	STATE ORTORLIGIT COUNTRY	COUNTRY OF CITIZENSHIP
CITIZENSHIP	Scottsdale	AZ	COUNTRY OF CITIZENSHIP US
CITIZENSHIP POST OFFICE			

Date 9/20/03

Signature (

fewed thurs

FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	HILL	Jeremy	
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	Middlebury	СТ	US
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	12 Sandy Beach Road	Middlebury	CT 06762
Signature	a Mell.	Date	24-03



APPOINTMENT OF POWER OF ATTORNEY BY ASSIGNEE OF ENTIRE INTEREST

Power Medical Interventions, Inc., as assignee of the entire right, title, and interest in Patent Application Serial No. 10/632,271 filed on July 31, 2003 entitled **ORIFICE INTRODUCER DEVICE**, does hereby appoint, Patrick J. Birde, Reg. No.29,770, Michelle M. Carniaux, Reg. No. 36,098, Clifford A. Ulrich, Reg. No. 42,194 and Thomas C. Hughes, Reg. No. 42,674 as its attorneys/agents with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Please address all communications regarding this application to:

KENYON & KENYON One Broadway New York, New York 10004 Customer No. 26646

Please direct all telephone calls to Patrick J. Birde, (212) 425-7200.

Power Medical Interventions, Inc.

110 Union Square Drive New Hope, PA 18938

Dated: 9/18/03, 2003

Name: Michael P. Whitman

Title: President